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THIRD REQUEST (SEE ATTACHED) -- PLEASE RESPOND

PTC/SB/83 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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| REQUEST FOR WITHDRAWAL |
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| AS ATTORNEY OR AGENT |
| AND CHANGE OF |
| CORRESPONDENCE ADDRESS |

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|-------------------------------------|----------------------------|---------------------------------|
| Application Number | 09/833,654 | |
| Filing Date | 4/13/2001 | RECEIVED |
| First Named Inventor | GILLESPIE | CENTRAL FAX CENTER |
| Art Unit | 3628 | |
| Examiner Name | Nguyen, Nga B. | JUL 2 1 2004 |
| Attorney Docket Number | 3782-3 | |

| P.O. | missioner fo Box 1450 andria, VA 2 | | ATTN: JO | HN LOV | /E, | GROUI | PDIRE | CTOR | | OFF | | |
|--|--|---------------------------------------|---------------------------------|--------------|--|---------|------------|---------|----------|-----|--|--|
| Pleas | Please withdraw me as attorney or agent for the above identified patent application, and | | | | | | | | | | | |
| | | /s/agents of record. | | | | | | | | | | |
| | the attornevs/a | agents (with registration num | bers) listed on t | he attach | ed n | aner(e) | or | | | | | |
| | | agents associated with Custo | | | - P | aper(s) | <u> </u> | | | | | |
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| The n | easons for this | request are: Client's lack of c | ommunication an | d failure to | pay t | ees. | | | | | | |
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| | | CORRESI | PONDENCE | ADD | KES | 5 | | | | | | |
| 1 71 | ne corresponde | ence address is NOT affecte | d by this withdr | awal. | | | | | | - | | |
| 2. 🗸 C | hange the corr | espondence address and dir | rect all future co | rrespond | ence | to: | | | | | | |
| [] | | | · /=- | | | | | | | | | |
| Li Custo | omer Number: | | | | | | | | | | | |
| OR | | | | | | | | | | | | |
| | m <i>or</i> lividual Name | Kenneth E. Gillespie | | | | | | | | | | |
| Address | | 347 Randall Avenue | | | | | | | | | | |
| Address | | | ···· | | | | *** | | | | | |
| City | | Freeport | State | NY | | | | Zip | 11520 | | | |
| Country | | U.S.A. | | · | ************************************** | | | | <u> </u> | | | |
| Telephone | | 516-867-7777 | | | | Fax | | | | | | |
| Name Robert W. Faris | | | | | | | | | | | | |
| Signature | Nave | Registration N | | | | No. | No. 31,352 | | | | | |
| Date | 07/21/2004 | Telephone No | | | | | | | | | | |
| NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdrawals groupelled is approved. | | | | | | | | | | | | |

This collection of Information is required by 37 GFR 1.36. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 GFR 1.14. This collection is sestimated to take 12 minutes to complete, including gathering, prepening, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Tradomark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/S6/83 (09-03)
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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

| Application Number | 09/833,654 | AFF |
|------------------------|----------------|--------------------|
| Filing Date | 04/13/2001 | |
| First Named Inventor | Gillespie | |
| Art Unit | 3628 | a 00 45 |
| Examiner Name | Nguyen, Nga B. | |
| Attorney Docket Number | 9782-3 | RECEIVED |
| | | CENTRAL FAX CENTER |

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| To: Commissioner for P.O. Box 1450 | r Patents | | | | | | JUL | 21 | 2004 |
| Alexandria, VA 22 | 313-1450 | • | | | | | | | |
| Please withdraw me | as attorney or agent for the above id | dentified patent applica | ition, ar | nd | | | | | Ì |
| all the attorney | s/agents of record. | | | | | | | | ł |
| the attornays/a | gents (with registration numbers) list | ed on the attached pap | er(s), c | or | | | | | |
| the attorneys/a | gents associated with Customer Nun | nber | | | - | | | | |
| NOTE: This box of practition | can only be checked when the power ers associated with a customer numb | of attorney of record in the second in the s | n the ap | oplication | n is to | all the | | | |
| The reasons for this | requestare: Client's lack | of communicati | on ai | nd int | ețe | st. | | | |
| | CORRESPOND | ENCE ADDRESS | 3 | | | | | | 1 1 |
| 1. The corresponde | ance address is NOT affected by this | withdrawal | | | | , | | | 7 |
| <u></u> | espondence address and direct all fu | | ٥. | | | | | | |
| | | | . | | | | | | 1 |
| Customer Number: | | | | | | | | | } |
| OR | | · | | | | | | | |
| Firm or Individual Name | Kenneth E. Gillespie | | | | | | | | 7 |
| Address | 347 Randali Avenue | | | | | | • | | 1 |
| Address | | | | ***** | | | - | | 1 |
| City | Freeport | State NY | | | Zip | 11520 | | | 1 |
| Country | U.S.A. | | | | | | , , , , , , , , , , , , , , , , , , , | | - |
| Telephone | 516-867-7777 | | Fax | | | | | | 7 |
| Name Robert W. Faris | | | | | | <u> </u> | | |] |
| Signature Tax | 7 | Registration N | 3 | 1,352 | | | | | |
| Date | Telephone No | 1., | 03-816-40 | | | | | _ | |
| NOTE: Withdrawal is effective w date of a time period for respons | hen approved rather than when received. Unle te or possible extension period, the request to w | cs there are at least 30 days withdraw is normally disappro | between ved | approval c | of withd | rewel and | the expir | ation | 1 |

This collection of information is required by 37 CFR 1.36. The information is required to obtain or rotain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application farm to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the CNIef Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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